hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450, on March 1, 2005 Jeannie Camara (Typed or Printed Name of Person Mailing Paper or Fee) (Signature of Person Mailing Paper or Fee) Application Number : 09/733,372 Confirmation Number: 1974 **Applicant** : Paul R. Petersen Filed : December 8, 2000 TC/A.U. : 3625 Examiner : Akers, Geoffrey R.

: M00-175100

: 22,835

**AMENDMENT TRANSMITTAL LETTER** 

Mail Stop: Non-Fee Amendment
Assistant Commissioner for Patents

P.O. Box 1450

Docket Number

Customer No.

Alexandria, VA 22313-1450

Sir:

In connection with the above-referenced U. S. patent application, transmitted herewith are the following papers:

 10110 ***111	S papers.				
[x]	Response under 37 C.F.R. § 1.111 to official action mailed <u>January 4, 2005.</u>				
[]	A petition for extension of time is also enclosed with a fee of \$55.00 for a one-				
	month extension for a small entity.				
[]	Terminal disclaimer under 37 C.F. R. § 1.321(c), including				
	[] check for \$110.00 fee under 37 C.F.R. § 1.20(d), and				
	[] 2 certificates under 37 C.F.R. § 3.73(b).				
[]	Information disclosure statement, form 1449 and references.				
[x]	No additional claims fees are required.				

[] An additional fee is required, and is calculated as shown below:

AMENDED CLAIMS								
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE			
Total Claims		MINUS = 20	0	x \$18 =				
Independent Claims		MINUS = 3	0	x \$78 =				
If Amendment adds mult Total Amendment Fee  If small entity status is cl								
TOTAL ADDITIONAL	\$0.00							

[] A check in the amount	of \$	is enclosed.
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Respectfully submitted,

By

Edward J. Grundler Registration No. 47,615

Date: March 1, 2005

A. Richard Park PARK, VAUGHAN & FLEMING LLP 2820 Fifth Street Davis, CA 95616-4692 Tel: (530) 759-1663

FAX: (530) 759-1665

<sup>[]</sup> Charge \$\_\_\_ to Deposit Account No. \_\_\_\_ (Docket No. \_\_\_\_).

<sup>[</sup>x] Please deduct any <u>underpayments</u>, credit any <u>overpayments</u>, and charge all required <u>extension of time fees</u> to Deposit Account Number 50-1003. (Docket No. M00-175100).



HEZS CFW

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Jeannie Camara

(Typed or Printed Name of Person Mailing Paper or Fee)

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Application Number: 09/733,372

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Examiner

: Akers, Geoffrey R.

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M/S: Box Non-Fee Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria VA 22313-1450

## **AMENDMENT**

Sir

In response to the office action of **January 4, 2005**, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.